


AO 435 (Rev. 04/18)				ADMINISTRATIVE OFFICE OF THE UNITED STATES COURTS TRANSCRIPT ORDER				FOR COURT USE ONLY DUE DATE:																																																			
Please Read Instructions:																																																											
1. NAME David Voreacos		2. PHONE NUMBER (201) 417-8444		3. DATE 11/3/2021		6. STATE NY		7. ZIP CODE 10022																																																			
4. DELIVERY ADDRESS OR EMAIL dvoreacos@bloomberg.net		5. CITY New York		10. FROM 9/13/2021		11. TO 9/13/2021																																																					
8. CASE NUMBER 21-cr-009		9. JUDGE Hanks		DATES OF PROCEEDINGS		LOCATION OF PROCEEDINGS																																																					
12. CASE NAME USA v Brockman		13. CITY Houston		14. STATE TX																																																							
15. ORDER FOR <input checked="" type="checkbox"/> APPEAL <input type="checkbox"/> NON-APPEAL		<input checked="" type="checkbox"/> CRIMINAL <input type="checkbox"/> CIVIL		<input type="checkbox"/> CRIMINAL JUSTICE ACT <input type="checkbox"/> IN FORMA PAUPERIS		<input type="checkbox"/> BANKRUPTCY <input type="checkbox"/> OTHER																																																					
16. TRANSCRIPT REQUESTED (Specify portion(s) and date(s) of proceeding(s) for which transcript is requested)																																																											
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">PORTIONS</th> <th>DATE(S)</th> <th>PORTION(S)</th> <th>DATE(S)</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/> VOIR DIRE</td> <td></td> <td></td> <td><input type="checkbox"/> TESTIMONY (Specify Witness)</td> <td></td> </tr> <tr> <td><input type="checkbox"/> OPENING STATEMENT (Plaintiff)</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td><input type="checkbox"/> OPENING STATEMENT (Defendant)</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td><input type="checkbox"/> CLOSING ARGUMENT (Plaintiff)</td> <td></td> <td></td> <td><input checked="" type="checkbox"/> PRE-TRIAL PROCEEDING (Specy)</td> <td></td> </tr> <tr> <td><input type="checkbox"/> CLOSING ARGUMENT (Defendant)</td> <td></td> <td></td> <td>Status conference</td> <td>9/13/2021</td> </tr> <tr> <td><input type="checkbox"/> OPINION OF COURT</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td><input type="checkbox"/> JURY INSTRUCTIONS</td> <td></td> <td></td> <td><input type="checkbox"/> OTHER (Specify)</td> <td></td> </tr> <tr> <td><input type="checkbox"/> SENTENCING</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td><input type="checkbox"/> BAIL HEARING</td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>										PORTIONS		DATE(S)	PORTION(S)	DATE(S)	<input type="checkbox"/> VOIR DIRE			<input type="checkbox"/> TESTIMONY (Specify Witness)		<input type="checkbox"/> OPENING STATEMENT (Plaintiff)					<input type="checkbox"/> OPENING STATEMENT (Defendant)					<input type="checkbox"/> CLOSING ARGUMENT (Plaintiff)			<input checked="" type="checkbox"/> PRE-TRIAL PROCEEDING (Specy)		<input type="checkbox"/> CLOSING ARGUMENT (Defendant)			Status conference	9/13/2021	<input type="checkbox"/> OPINION OF COURT					<input type="checkbox"/> JURY INSTRUCTIONS			<input type="checkbox"/> OTHER (Specify)		<input type="checkbox"/> SENTENCING					<input type="checkbox"/> BAIL HEARING				
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17. ORDER																																																											
CATEGORY	ORIGINAL (Includes Certified Copy to Clerk for Records of the Court)	FIRST COPY	ADDITIONAL COPIES	NO. OF PAGES ESTIMATE	COSTS																																																						
ORDINARY	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES																																																								
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EXPEDITED	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES		FILED																																																						
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DAILY	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES		Nathan Ochsner, Clerk of Court																																																						
HOURLY	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES																																																								
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CERTIFICATION (18. & 19.) By signing below, I certify that I will pay all charges (deposit plus additional).				ESTIMATE TOTAL	0.00																																																						
18. SIGNATURE 				PROCESSED BY																																																							
19. DATE 11/3/2021				PHONE NUMBER																																																							
TRANSCRIPT TO BE PREPARED BY				COURT ADDRESS																																																							
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